

U.S. Department of Labor
Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)



U.S. Wage and Hour Division

Rev. Dec. 2008

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input type="checkbox"/>		ADDRESS		OMB No.: 1235-0008 Expires: 01/31/2015	
Lindahl Marine Contractors, Inc.		740 Twin Rail Dr Minooka IL 60447			
PAYROLL NO. 006	FOR WEEK ENDING 11/01/2013	PROJECT AND LOCATION Clean Raw Water Intake Naval Station Great Lakes, Illinois		PROJECT OR CONTRACT NO. N40083-12-C-3015	

(1) NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	(2) NO. OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	OT. OR ST.	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS						(9) NET WAGES PAID FOR WEEK
				M	T	W	T	F	S	S				FICA	WITH- HOLDING TAX	State	County	OTHER	TOTAL DEDUCTIONS	
				21	22	23	24	25	26	27										
HOURS WORKED EACH DAY																				
(b) (6)	3	Operating Enginners FLT Class 1	O									\$76.95	\$1,128.60	\$123.96	\$168.21	\$53.13	\$8.10	\$40.73	\$394.13	\$1,708.23
			S	8.00	8.00	2.00	2.00	2.00			22.00	\$1.30	\$2,102.36							
(b) (6)	8	Operating Enginners FLT Class 1	O									\$76.95	\$1,128.60	\$121.61	\$107.32	\$54.04	\$49.75	\$34.25	\$366.97	\$2,376.01
			S	8.00	8.00	2.00	2.00	2.00			22.00	\$1.30	\$2,742.98							
(b) (6)	1	Operating Enginners FLT Class 1	O				1.00				1.00	\$74.70	\$1,767.90	\$140.33	\$351.81	\$61.72	\$57.42	\$44.20	\$655.48	\$1,612.42
			S	8.00	8.00	2.00	8.00	8.00			34.00	49.80	\$2,267.90							
(b) (6)	2	Operating Enginners FLT Class 1	O									\$76.95	\$820.80	\$82.25	\$97.67	\$53.76		\$27.09	\$260.77	\$1,277.53
			S	8.00	2.00	2.00	2.00	2.00			16.00	\$1.30	\$1,538.30							
(b) (6)	1	Operating Enginners FLT Class 1	O									\$76.95	\$1,128.60	\$120.38	\$285.78	\$52.85	\$49.25	\$39.56	\$547.82	\$1,472.74
			S	8.00	8.00	2.00	2.00	2.00			22.00	\$1.30	\$2,020.56							
			O																	
			S																	
			O																	
			S																	
			O																	
			S																	

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that it will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W., Washington, D.C. 20210

(over)

Date 11/01/2013

I, (b) (6)(b) (6) Office Manager
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Lindahl Marine Contractors, Inc on the

(Contractor or Subcontractor)

Naval Station Great Lakes, Illinois;

(Building or Work)

21 day of October, 2013, and ending the 25 day of October, 2013

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said

Lindahl Marine Contractors, Inc

(Contractor or Subcontractor)

from the full

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- ☒ — in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

- ☐ — Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

NAME AND TITLE

(b) (6)

Office Manager

SIGNATURE

(b) (6)(b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

U.S. Department of Labor
Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)



U.S. Wage and Hour Division

Rev. Dec. 2008

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input type="checkbox"/> Lindahl Marine Contractors, Inc	ADDRESS 740 Twin Rail Dr. Minooka IL 60447	OMB No.: 1235-0008 Expires: 01/31/2015
---	--	---

PAYROLL NO. 009	FOR WEEK ENDING 11/10/2013	PROJECT AND LOCATION Clean Raw Water intake Naval Station Great Lakes, Illinois	PROJECT OR CONTRACT NO. N40083-12-C-3015
---------------------------	--------------------------------------	---	--

(1) NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	(2) NO. OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	OT OR ST.	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS						(9) NET WAGES PAID FOR WEEK
				M	T	W	T	F	S	S				FICA	WITH- HOLDING TAX	State	County	OTHER	TOTAL DEDUCTIONS	
				11	12	13	14	15	16	17										
				HOURS WORKED EACH DAY																
(b) (6)	3	Operating Engineers FLT Class 1	O								\$76.95	\$1,026.00	\$103.73	\$128.54	\$44.14	\$6.78	\$27.05	\$310.24	\$1,407.76	
			S		2.00	8.00	2.00	8.00		20.00	\$1.30	\$1,718.00								
(b) (6)	8	Operating Engineers FLT Class 1	O								\$76.95	\$1,026.00	\$103.13	\$71.09	\$45.83	\$42.19	\$27.05	\$289.29	\$1,420.71	
			S		2.00	8.00	2.00	8.00		20.00	\$1.30	\$1,710.00								
(b) (6)	1	Operating Engineers FLT Class 1	O								\$76.95	\$1,026.00	\$99.84	\$218.68	\$43.72	\$40.85	\$26.90	\$429.99	\$1,237.21	
			S		2.00	8.00	2.00	8.00		20.00	\$1.30	\$1,667.20								
(b) (6)	2	Operating Engineers FLT Class 1	O								\$76.95	\$410.40	\$122.96	\$275.43	\$80.36		\$33.56	\$512.31	\$1,434.09	
			S					8.00		8.00	\$1.30	\$1,946.40								
(b) (6)	2	Operating Engineers FLT Class 1	O								\$76.95	\$1,026.00	\$101.75	\$135.89	\$66.50		\$26.90	\$331.04	\$1,360.96	
			S		2.00	8.00	2.00	8.00		20.00	\$1.30	\$1,692.00								
(b) (6)	0	Operating Engineers FLT Class 1	O								\$74.70	\$398.40	\$100.74	\$240.33	\$65.84		\$28.04	\$434.95	\$1,221.05	
			S				8.00			8.00	49.80	\$1,656.00								
			O																	
			S																	
			O																	
			S																	

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that it will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W., Washington, D.C. 20210

(over)

Date 11/21/2013

I, (b) (6) Office Manager
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Lindahl Marine Contractors, Inc

(Contractor or Subcontractor)

on the

Navel Station Great Lakes, Illinois

(Building or Work)

; that during the payroll period commencing on the

11 day of November, 2013, and ending the 17 day of November, 2013

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said

Lindahl Marine Contractors, Inc

(Contractor or Subcontractor)

from the full

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 78 Stat. 357; 40 U.S.C. § 3145), and described below:

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS



— in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH



— Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

NAME AND TITLE

(b) (6)
Office Manager

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

U.S. Department of Labor
Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.



U.S. Wage and Hour Division

Rev. Dec. 2008

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input type="checkbox"/>	ADDRESS	OMB No.: 1235-0008 Expires: 01/31/2015
Lindahl Marine Contractors, Inc	740 Twin Rail Dr. Minooka IL 60447	

PAYROLL NO. 009	FOR WEEK ENDING 11/10/2013	PROJECT AND LOCATION Clean Raw Water intake Naval Station Great Lakes, Illinois	PROJECT OR CONTRACT NO. N40083-12-C-3015
--------------------	-------------------------------	---	---

(1) NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	(2) NO. OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	OT OR ST.	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS						(9) NET WAGES PAID FOR WEEK
				M	T	W	T	F	S	S				FICA	WITH- HOLDING TAX	State	County	OTHER	TOTAL DEDUCTIONS	
				4	5	6	7	8	9	10										
				HOURS WORKED EACH DAY																
(b) (6)	3	Operating Engineers FLT Class 1	O				2.50				2.50	\$76.95	\$1,423.58	\$158.67	\$265.74	\$68.55	\$10.37	\$52.32	\$555.65	\$1,651.93
			S			8.00	8.00	8.00				24.00	\$1.30							
(b) (6)	8	Operating Engineers FLT Class 1	O				2.50				2.50	\$76.95	\$1,423.58	\$157.43	\$177.58	\$69.97	\$64.41	\$51.92	\$521.31	\$1,670.27
			S			8.00	8.00	8.00				24.00	\$1.30							
(b) (6)	1	Operating Engineers FLT Class 1	O					2.50			2.50	\$76.95	\$1,423.58	\$151.81	\$393.79	\$66.81	\$62.11	\$50.08	\$724.60	\$1,393.38
			S			8.00	8.00	8.00				24.00	\$1.30							
(b) (6)	2	Operating Engineers FLT Class 1	O				2.50				2.50	\$76.95	\$602.78	\$148.47	\$360.59	\$97.04		\$49.05	\$655.15	\$1,316.76
			S				8.00					8.00	\$1.30							
(b) (6)	2	Operating Engineers FLT Class 1	O				2.50				2.50	\$76.95	\$1,013.18	\$133.54	\$202.39	\$87.28		\$43.97	\$467.18	\$1,417.46
			S				8.00	8.00				16.00	\$1.30							
(b) (6)	1	Operating Engineers FLT Class 1	O				2.50				2.50	\$76.95	\$602.78	\$69.62	\$119.86	\$43.53		\$22.80	\$255.81	\$718.97
			S				8.00					8.00	\$1.30							
			O																	
			S																	
			O																	
			S																	

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that it will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W., Washington, D.C. 20210

(over)

Date 11/21/2013

I, (b) (6) Office Manager
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Lindahl Marine Contractors, Inc

(Contractor or Subcontractor)

on the

Navel Station Great Lakes, Illinois

(Building or Work)

; that during the payroll period commencing on the

04 day of November, 2013, and ending the 10 day of November, 2013

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said

Lindahl Marine Contractors, Inc

(Contractor or Subcontractor)

from the full

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS



— in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☐ — Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

NAME AND TITLE

(b) (6) (b) (6)
Office Manager

SIGNATURE

(b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

U.S. Department of Labor
Employment Standards Administration
Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.



NAME OF CONTRACTOR ☒ ADDRESS OMB No.: 1215-0149

Mersino Dewatering Inc.

10162 E. Coldwater Rd

PAYROLL NO. 11

FOR WEEK ENDING

PROJECT AND LOCATION

PROJECT OR CONTRACTOR NO.

12/8/2013

Clean Raw Water Intake
Naval Station Great Lakes, Illinois

N40083-12-C-3015

(1)		(3)	(4) DAY AND DATE								(6)		(7)	(8) DEDUCTIONS					(9)	
NAME, ADDRESS, AND SOCIAL SECURITY NUMBER OF EMPLOYEE		WORK CLASSIFI CATION	OT. OR ST.	M	T	W	T	F	S	S	TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	FICA	WITH- HOLDING TAX	STATE	DUES	OTHER	TOTAL DEDUCTIONS	NET WAGES PAID FOR WEEK
				2-Dec	3-Dec	4-Dec	5-Dec	6-Dec	7-Dec	8-Dec										
				HOURS WORKED EACH DAY																
(b) (6)	Operator WM	O		4.5							4.5	\$ 66.53	\$ 299.36	\$ 50.04					\$ 50.04	\$ 604.12
		S		8							8	\$ 44.35	\$ 354.80							
(b) (6)	Operator WM	O	6	4.5	2		0.5				13	\$ 66.53	\$ 864.83	\$201.87					\$ 201.87	\$ 2,436.95
		S	8	8	8	8	8			40	\$ 44.35	\$1,774.00								
(b) (6)	Operator WM	O		4.5							4.5	\$ 66.53	\$ 299.36	\$ 50.04					\$ 50.04	\$ 604.12
		S		8						8	\$ 44.35	\$ 354.80								
(b) (6)	Operator WM	O	5.5	3.5	1.5	2					12.5	\$ 55.28	\$ 690.94	\$143.07					\$ 143.07	\$ 1,727.07
		S	8	8	8	8				32	\$ 36.85	\$1,179.20								
				27.5	49	19.5	18	8.5	0	0	122.5	\$5,817.29								

We estimate that it will take an average of 56 minutes to complete this collection of information, including time for reviewing instructions searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection of information, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, ESA, U. S. Department of Labor, Room S3502, 200 Constitution Avenue, N. W., Washington, D. C. 20210. FORM WH-347, Revised Nov. 1998 - FORMERLY SOL 184 - PURCHASE THIS FORM DIRECTLY FROM THE SUPT. OF DOCUMENTS

Date 12/12/2013

I, (b) (6)(b) (6) Payroll Specialist
(Name of Signatory Party) (Title)

do hereby state:

PA (1) That I pay or supervise the payment of the persons employed by

Mersino Dewatering, Inc on the
(Contractor or Subcontractor)

Clean Raw Water Intake-Naval Station Great Lakes, Illinois; that during the payroll period commencing on the
(Building or Work)

2 day of December, 2013, and ending the 8 day of December 2013.
all persons employed on said project have been paid the full weekly wages earned, that no rebates have

Mersino Dewatering Inc. from the full

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- ☐ — in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

- ☒ — Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

NAME AND TITLE	
<u>(b) (6)(b) (6) / Payroll</u>	<u>(b) (6)(b) (6)</u>
THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

U.S. Department of Labor
Employment Standards Administration
Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.



NAME OF CONTRACTOR ☒ ADDRESS OMB No.: 1215-0149

Mersino Dewatering Inc. 10162 E. Coldwater Rd

PAYROLL NO. 10 FOR WEEK ENDING 12/1/2013 PROJECT AND LOCATION PROJECT OR CONTRACTOR NO.
Clean Raw Water Intake N40083-12-C-3015
Naval Station Great Lakes, Illinois

(1) NAME, ADDRESS, AND SOCIAL SECURITY NUMBER OF EMPLOYEE	(3) WORK CLASSIFI CATION	OT OR ST.	(4) DAY AND DATE							(6) TOTAL HOURS	(7) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS					(9) NET WAGES PAID FOR WEEK	
			M	T	W	T	F	S	S				FICA	WITH- HOLDING TAX	STATE	DUES	OTHER		
			25-Nov	26-Nov	27-Nov	28-Nov	29-Nov	30-Nov	1-Dec										
			HOURS WORKED EACH DAY																
No Activity										0		\$ -	\$ -					\$ -	\$ -
										0		\$ -							
										0		\$ -	\$ -					\$ -	\$ -
										0		\$ -							
			0	0	0	0	0	0	0	0		\$ -							

We estimate that it will take an average of 56 minutes to complete this collection of information, including time for reviewing instructions searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection of information, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, ESA, U. S. Department of Labor, Room S3502, 200 Constitution Avenue, N. W., Washington, D. C. 20210. FORM WH-347, Revised Nov. 1998 - FORMERLY SOL 184 - PURCHASE THIS FORM DIRECTLY FROM THE SUPT. OF DOCUMENTS

Date 12/12/2013

I, (b) (6)(b) (6) Payroll Specialist
(Name of Signatory Party) (Title)

do hereby state:

P/ (1) That I pay or supervise the payment of the persons employed by

Mersino Dewatering, Inc on the
(Contractor or Subcontractor)

Clean Raw Water Intake-Naval Station Great Lakes, Illino; that during the payroll period commencing on the
(Building or Work)

25 day of November, 2013, and ending the 1 day of December 2013.
all persons employed on said project have been paid the full weekly wages earned, that no rebates have

Mersino Dewatering Inc. from the full

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

- ☒ — Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

No Activity

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- ☐ — in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4(c) below.

NAME AND TITLE

(b) (6)(b) (6)(b) (6) Payroll

(b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.



NAME OF CONTRACTOR <input checked="" type="checkbox"/>				ADDRESS		OMB No.: 1215-0149														
Mersino Dewatering Inc.				10162 E. Coldwater Rd																
PAYROLL NO. 9		FOR WEEK ENDING		PROJECT AND LOCATION		PROJECT OR CONTRACTOR NO.														
		11/24/2013		Clean Raw Water Intake Naval Station Great Lakes, Illinois		N40083-12-C-3015														
(1)	(3)	(4) DAY AND DATE	(5)	(6)	(7)	(8) DEDUCTIONS					(9)									
NAME, ADDRESS, AND SOCIAL SECURITY NUMBER OF EMPLOYEE	WORK CLASSIFI CATION	OT. OR ST.	M	T	W	T	F	S	S	TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	FICA	WITH- HOLDING TAX	STATE	DUES	OTHER	TOTAL DEDUCTIONS	NET WAGES PAID FOR WEEK	
			18-Nov	19-Nov	20-Nov	21-Nov	22-Nov	23-Nov	24-Nov											
			HOURS WORKED EACH DAY																	
No Activity										0		\$ -	\$ -						\$ -	\$ -
										0		\$ -								
										0		\$ -	\$ -						\$ -	\$ -
										0		\$ -								
			0	0	0	0	0	0	0	0		\$ -								

We estimate that it will take an average of 56 minutes to complete this collection of information, including time for reviewing instructions searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection of information, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, ESA, U. S. Department of Labor, Room S3502, 200 Constitution Avenue, N. W., Washington, D. C. 20210. FORM WH-347, Revised Nov. 1998 - FORMERLY SOL 184 - PURCHASE THIS FORM DIRECTLY FROM THE SUPT. OF DOCUMENTS

Date 11/22/2013

I, (b) (6)(b) (6) Payroll Specialist
(Name of Signatory Party) (Title)

do hereby state:

P/ (1) That I pay or supervise the payment of the persons employed by

Mersino Dewatering, Inc on the
(Contractor or Subcontractor)

Clean Raw Water Intake-Naval Station Great Lakes, Illino; that during the payroll period commencing on the
(Building or Work)

18 day of November, 2013, and ending the 24 day of November 2013.
all persons employed on said project have been paid the full weekly wages earned, that no rebates have

Mersino Dewatering Inc. from the full

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- ☐ — in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

- ☒ — Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

No Activity

NAME AND TITLE <u>(b) (6)(b) (6)</u> Payroll	<u>(b) (6)(b) (6)</u>
THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

U.S. Department of Labor
Employment Standards Administration
Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.



NAME OF CONTRACTOR ☒ ☐ ADDRESS OMB No.: 1215-0149

Mersino Dewatering Inc. 10162 E. Coldwater Rd

PAYROLL NO. 8 FOR WEEK ENDING PROJECT AND LOCATION PROJECT OR CONTRACTOR NO.

11/17/2013

Clean Raw Water Intake
Naval Station Great Lakes, Illinois

N40083-12-C-3015

(1) NAME, ADDRESS, AND SOCIAL SECURITY NUMBER OF EMPLOYEE	(3) WORK CLASSIFI CATION	OT. OR ST.	(4) DAY AND DATE							TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS					(9) NET WAGES PAID FOR WEEK	
			M	T	W	T	F	S	S				FICA	WITH- HOLDING TAX	STATE	DUES	OTHER		TOTAL DEDUCTIONS
			11-Nov	12-Nov	13-Nov	14-Nov	15-Nov	16-Nov	17-Nov										
No Activity			HOURS WORKED EACH DAY							0		\$ -	\$ -					\$ -	\$ -
										0		\$ -							
										0		\$ -	\$ -					\$ -	\$ -
										0		\$ -							
			0	0	0	0	0	0	0	0	0	\$ -							

We estimate that it will take an average of 56 minutes to complete this collection of information, including time for reviewing instructions searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection of information, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, ESA, U. S. Department of Labor, Room S3502, 200 Constitution Avenue, N. W., Washington, D. C. 20210. FORM WH-347, Revised Nov. 1998 - FORMERLY SOL 184 - PURCHASE THIS FORM DIRECTLY FROM THE SUPT. OF DOCUMENTS

Date 11/20/2013

I, (b) (6)(b) (6)(b) (6) Payroll Specialist
(Name of Signatory Party) (Title)

do hereby state:

P/ (1) That I pay or supervise the payment of the persons employed by

Mersino Dewatering, Inc on the
(Contractor or Subcontractor)

Clean Raw Water Intake-Naval Station Great Lakes, Illinois; that during the payroll period commencing on the
(Building or Work)

11 day of November, 2013, and ending the 17 day of November 2013,
all persons employed on said project have been paid the full weekly wages earned, that no rebates have

Mersino Dewatering Inc. from the full

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- ☐ — in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

- ☒ — Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

No Activity

NAME AND TITLE	(b) (6)
(b) (6) / Payroll	(b) (6)
THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

U.S. Department of Labor
Employment Standards Administration
Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

[illegible]

We estimate that it will take an average of 56 minutes to complete this collection of information, including time for reviewing instructions searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection of information, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, ESA, U. S. Department of Labor, Room S3502, 200 Constitution Avenue, N. W., Washington, D. C. 20210. FORM WH-347, Revised Nov. 1998 - FORMERLY SOL 184 - PURCHASE THIS FORM DIRECTLY FROM THE SUPT. OF DOCUMENTS

Date 11/13/2013

I, (b) (6)(b) (6) Payroll Specialist
(Name of Signatory Party) (Title)

do hereby state:

P/ (1) That I pay or supervise the payment of the persons employed by

Mersino Dewatering, Inc on the
(Contractor or Subcontractor)

Clean Raw Water Intake-Naval Station Great Lakes, Illino; that during the payroll period commencing on the
(Building or Work)

4 day of November, 2013, and ending the 10 day of November 2013.
all persons employed on said project have been paid the full weekly wages earned, that no rebates have

Mersino Dewatering Inc. from the full

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination Incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- ☐ — in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

- ☒ — Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

No Activity

NAME AND TITLE	(b) (6)(b) (6) / Payroll	(b) (6)
THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.		

Employment Standards Administration
Wage and Hour Division

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.



NAME OF CONTRACTOR <input checked="" type="checkbox"/>										ADDRESS										OMB No.: 1215-0149											
Mersino Dewatering Inc.										10162 E. Coldwater Rd																					
PAYROLL NO. 6										FOR WEEK ENDING										PROJECT AND LOCATION										PROJECT OR CONTRACTOR NO.	
										11/3/2013										Clean Raw Water Intake										N40083-12-C-3015	
										Naval Station Great Lakes, Illinois																					
(1) NAME, ADDRESS, AND SOCIAL SECURITY NUMBER OF EMPLOYEE	(3) WORK CLASSIFI CATION	(4) DAY AND DATE OT. OR ST.	(5) DAY AND DATE							(6) TOTAL HOURS	(7) RATE OF PAY	(8) GROSS AMOUNT EARNED	(9) DEDUCTIONS					(10) NET WAGES PAID FOR WEEK													
			M	T	W	T	F	S	S																						
			28-Oct	29-Oct	30-Oct	31-Oct	1-Nov	2-Nov	3-Nov																						
			HOURS WORKED EACH DAY																												
(b) (6)	Operator WM	O	9	7							16	\$ 66.53	\$1,064.40	\$135.71					\$ 135.71	\$ 1,638.29											
		S	8	8							16	\$ 44.35	\$ 709.60																		
(b) (6)	Operator WM		9	7							16	\$ 66.53	\$1,064.40	\$135.71					\$ 135.71	\$ 1,638.29											
			8	8							16	\$ 44.35	\$ 709.60																		
			34	30	0	0	0	0	0	0	64	\$3,548.00																			

We estimate that it will take an average of 56 minutes to complete this collection of information, including time for reviewing instructions searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection of information, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, ESA, U. S. Department of Labor, Room S3502, 200 Constitution Avenue, N. W., Washington, D. C. 20210. FORM WH-347, Revised Nov. 1998 - FORMERLY SOL 184 - PURCHASE THIS FORM DIRECTLY FROM THE SUPT. OF DOCUMENTS

Date 11/6/2013

I, (b) (6)(b) (6) Payroll Specialist
(Name of Signatory Party) (Title)

do hereby state:

PA (1) That I pay or supervise the payment of the persons employed by

Mersino Dewatering, Inc on the
(Contractor or Subcontractor)

Clean Raw Water Intake-Naval Station Great Lakes, Illinois; that during the payroll period commencing on the
(Building or Work)

28 day of October, 2013, and ending the 3 day of November 2013.
all persons employed on said project have been paid the full weekly wages earned, that no rebates have

Mersino Dewatering Inc. from the full

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- ☐ — in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

- ☒ — Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

--

NAME AND TITLE	(b) (6)(b) (6) Payroll	(b) (6)
THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.		

U.S. Department of Labor
Employment Standards Administration
Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

[illegible]

We estimate that it will take an average of 56 minutes to complete this collection of information, including time for reviewing instructions searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection of information, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, ESA, U. S. Department of Labor, Room S3502, 200 Constitution Avenue, N. W., Washington, D. C. 20210. FORM WH-347, Revised Nov. 1998 - FORMERLY SOL 184 - PURCHASE THIS FORM DIRECTLY FROM THE SUPT. OF DOCUMENTS

Date 10/30/2013

I, (b) (6) Payroll Specialist
(Name of Signatory Party) (Title)

do hereby state:

Pr (1) That I pay or supervise the payment of the persons employed by

Mersino Dewatering, Inc on the
(Contractor or Subcontractor)

Clean Raw Water Intake-Naval Station Great Lakes, Illinois; that during the payroll period commencing on the
(Building or Work)

21 day of October, 2013, and ending the 27 day of October, 2013.
all persons employed on said project have been paid the full weekly wages earned, that no rebates have

Mersino Dewatering Inc. from the full

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- ☐ — in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

- ☒ — Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

NAME AND TITLE	<u>(b) (6)</u> <u>Payroll</u>
THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

U.S. Department of Labor
Employment Standards Administration
Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.



NAME OF CONTRACTOR ☒ ☐ ADDRESS OMB No.: 1215-0149
Mersino Dewatering Inc. 10162 E. Coldwater Rd

PAYROLL NO. 4 FOR WEEK ENDING 10/20/2013 PROJECT AND LOCATION PROJECT OR CONTRACTOR NO.
Clean Raw Water Intake N40083-12-C-3015
Naval Station Great Lakes, Illinois

(1)		(3)	(4) DAY AND DATE								Naval Station Great Lakes, Illinois								W-10000 12-0-0010				
NAME, ADDRESS, AND SOCIAL SECURITY NUMBER OF EMPLOYEE	WORK CLASSIFI CATION	OT. OR ST.	M	T	W	T	F	S	S	TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS						(9) NET WAGES PAID FOR WEEK				
			14-Oct	15-Oct	16-Oct	17-Oct	18-Oct	19-Oct	20-Oct				FICA	WITH- HOLDING TAX	STATE	DUES	OTHER	TOTAL DEDUCTIONS					
			HOURS WORKED EACH DAY																				
No Activity										0		\$ -	\$ -						\$ -	\$ -			
											0										\$ -		
										0		\$ -	\$ -						\$ -	\$ -			
											0										\$ -		
			0	0	0	0	0	0	0	0		\$ -											

We estimate that it will take an average of 56 minutes to complete this collection of information, including time for reviewing instructions searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection of information, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, ESA, U. S. Department of Labor, Room S3502, 200 Constitution Avenue, N. W., Washington, D. C. 20210. FORM WH-347, Revised Nov. 1998 - FORMERLY SOL 184 - PURCHASE THIS FORM DIRECTLY FROM THE SUPT. OF DOCUMENTS

Date 10/23/2013

I, (b) (6)(b) (6) Payroll Specialist
(Name of Signatory Party) (Title)

do hereby state:

P/ (1) That I pay or supervise the payment of the persons employed by

Mersino Dewatering, Inc on the
(Contractor or Subcontractor)

Clean Raw Water Intake-Naval Station Great Lakes, Illino; that during the payroll period commencing on the
(Building or Work)

14 day of October, 2013, and ending the 20 day of October, 2013.
all persons employed on said project have been paid the full weekly wages earned, that no rebates have

Mersino Dewatering Inc. from the full

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- ☐ — in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

- ☒ — Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

No Activity

NAME AND TITLE	(b) (6)
(b) (6) / Payroll	(b) (6)
THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

Employment Standards Administration
Wage and Hour Division

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

[illegible]

We estimate that it will take an average of 56 minutes to complete this collection of information, including time for reviewing instructions searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection of information, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, ESA, U. S. Department of Labor, Room S3502, 200 Constitution Avenue, N. W., Washington, D. C. 20210. FORM WH-347, Revised Nov. 1998 - FORMERLY SOL 184 - PURCHASE THIS FORM DIRECTLY FROM THE SUPT. OF DOCUMENTS

Date 10/16/2013

I, (b) (6)(b) (6) Payroll Specialist
(Name of Signatory Party) (Title)

do hereby state:

P/ (1) That I pay or supervise the payment of the persons employed by

Mersino Dewatering, Inc on the
(Contractor or Subcontractor)

Clean Raw Water Intake-Naval Station Great Lakes, Illino; that during the payroll period commencing on the
(Building or Work)

7 day of October, 2013, and ending the 13 day of October 2013.
all persons employed on said project have been paid the full weekly wages earned, that no rebates have

Mersino Dewatering Inc. from the full

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- ☐ — in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

- ☒ — Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

No Activity

NAME AND TITLE	(b) (6)
(b) (6)	Payroll

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

U.S. Department of Labor
Employment Standards Administration
Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.



NAME OF CONTRACTOR ☒ ADDRESS OMB No.: 1215-0149

Mersino Dewatering Inc.

10162 E. Coldwater Rd

PAYROLL NO. 2

FOR WEEK ENDING

10/6/2013

PROJECT AND LOCATION

Clean Raw Water Intake

Naval Station Great Lakes, Illinois

PROJECT OR CONTRACTOR NO.

N40083-12-C-3015

(1)		(3)	(4) DAY AND DATE							(6)			(7)	(8)					(9)	
NAME, ADDRESS, AND SOCIAL SECURITY NUMBER OF EMPLOYEE		WORK CLASSIFI CATION	OT. OR ST.	M	T	W	T	F	S	S	TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	DEDUCTIONS					NET WAGES PAID FOR WEEK	
				30-Sep	1-Oct	2-Oct	3-Oct	4-Oct	5-Oct	6-Oct				FICA	WITH- HOLDING TAX	STATE	DUES	OTHER		TOTAL DEDUCTIONS
				HOURS WORKED EACH DAY																
(b) (6)		Operator WM	O								0	\$ 66.53	\$ -	\$ 81.43					\$ 81.43	\$ 982.97
			S	8	8	8					24	\$ 44.35	\$1,064.40							
(b) (6)		Operator WM	O								0	\$ 66.53	\$ -	\$ 81.43					\$ 81.43	\$ 982.97
			S	8	8	8					24	\$ 44.35	\$1,064.40							
				16	16	16	0	0	0	0	48		\$2,128.80							

We estimate that it will take an average of 56 minutes to complete this collection of information, including time for reviewing instructions searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection of information, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, ESA, U. S. Department of Labor, Room S3502, 200 Constitution Avenue, N. W., Washington, D. C. 20210. FORM WH-347, Revised Nov. 1998 - FORMERLY SOL 184 - PURCHASE THIS FORM DIRECTLY FROM THE SUPT. OF DOCUMENTS

Date 10/9/2013

I, (b) (6)(b) (6) Payroll Specialist
(Name of Signatory Party) (Title)

do hereby state:

P/ (1) That I pay or supervise the payment of the persons employed by

Mersino Dewatering, Inc on the
(Contractor or Subcontractor)

Clean Raw Water Intake-Naval Station Great Lakes, Illino; that during the payroll period commencing on the
(Building or Work)

30 day of September, 2013, and ending the 6 day of October, 2013.
all persons employed on said project have been paid the full weekly wages earned, that no rebates have

Mersino Dewatering Inc. from the full

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- ☐ — in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

- ☒ — Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

--

NAME AND TITLE	(b) (6)
(b) (6)(b) (6)(b) (6) Payroll	(b) (6)
THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

U.S. Department of Labor

Employment Standards Administration
Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.



NAME OF CONTRACTOR ☒ ADDRESS OMB No.: 1215-0149

Mersino Dewatering Inc.

10162 E. Coldwater Rd

PAYROLL NO. 1

FOR WEEK ENDING

PROJECT AND LOCATION

PROJECT OR CONTRACTOR NO.

9/29/2013

Clean Raw Water Intake

N40083-12-C-3015

Naval Station Great Lakes, Illinois

Naval Station Great Lakes, Illinois										N40003-12-C-3015									
(1)	(3)	OT OR ST.	(4) DAY AND DATE							TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS					(9) NET WAGES PAID FOR WEEK	
NAME, ADDRESS, AND SOCIAL SECURITY NUMBER OF EMPLOYEE	WORK CLASSIFICATION		M	T	W	T	F	S	S				FICA	WITH-HOLDING TAX	STATE	DUES	OTHER		TOTAL DEDUCTIONS
			23-Sep	24-Sep	25-Sep	26-Sep	27-Sep	28-Sep	29-Sep										
			HOURS WORKED EACH DAY																
(b) (6) (b) (6) (b) (6)	Operator WM	O	4	1	1	3	2			11	\$ 66.53	\$ 731.78	\$191.69					\$ 191.69	\$ 2,314.08
		S	8	8	8	8	8			40	\$ 44.35	\$1,774.00							
(b) (6) (b) (6)	Operator WM	O		6	1	3	2			12	\$ 66.53	\$ 798.30	\$169.64					\$ 169.64	\$ 2,047.86
		S		8	8	8	8			32	\$ 44.35	\$1,419.20							

We estimate that it will take an average of 56 minutes to complete this collection of information, including time for reviewing instructions searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection of information, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, ESA, U. S. Department of Labor, Room S3502, 200 Constitution Avenue, N. W., Washington, D. C. 20210. FORM WH-347, Revised Nov. 1998 - FORMERLY SOL 184 - PURCHASE THIS FORM DIRECTLY FROM THE SUPT. OF DOCUMENTS

U.S. Department of Labor
Employment Standards Administration
Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.



NAME OF CONTRACTOR ☒ ☐ ADDRESS OMB No.: 1215-0149

Mersino Dewatering Inc.

10162 E. Coldwater Rd

PAYROLL NO. 12

FOR WEEK ENDING

PROJECT AND LOCATION

PROJECT OR CONTRACTOR NO.

12/15/2013

Clean Raw Water Intake

N40083-12-C-3015

Naval Station Great Lakes, Illinois

(1)	(3)		(4) DAY AND DATE							Naval Station Great Lakes, Illinois										(9)
NAME, ADDRESS, AND SOCIAL SECURITY NUMBER OF EMPLOYEE	WORK CLASSIFI CATION	OT. OR ST.	M	T	W	T	F	S	S	TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS					NET WAGES PAID FOR WEEK		
			9-Dec	10-Dec	11-Dec	12-Dec	13-Dec	14-Dec	15-Dec				FICA	WITH- HOLDING TAX	STATE	DUES	OTHER		TOTAL DEDUCTIONS	
			HOURS WORKED EACH DAY																	
No Activity										0		\$ -	\$ -					\$ -	\$ -	
									0		\$ -									
										0		\$ -	\$ -					\$ -	\$ -	
									0		\$ -									
			0	0	0	0	0	0	0	0		\$ -								

We estimate that it will take an average of 56 minutes to complete this collection of information, including time for reviewing instructions searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection of information, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, ESA, U. S. Department of Labor, Room S3502, 200 Constitution Avenue, N. W., Washington, D. C. 20210. FORM WH-347, Revised Nov. 1998 - FORMERLY SOL 184 - PURCHASE THIS FORM DIRECTLY FROM THE SUPT. OF DOCUMENTS

Date 12/24/2013

I, (b) (6)(b) (6) Payroll Specialist
(Name of Signatory Party) (Title)

do hereby state:

Pr (1) That I pay or supervise the payment of the persons employed by

Mersino Dewatering, Inc on the
(Contractor or Subcontractor)

Clean Raw Water Intake-Naval Station Great Lakes, Illino; that during the payroll period commencing on the
(Building or Work)

9 day of December, 2013, and ending the 15 day of December 2013.
all persons employed on said project have been paid the full weekly wages earned, that no rebates have

Mersino Dewatering Inc. from the full

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- ☐ — in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

- ☒ — Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

No Activity

NAME AND TITLE	(b) (6)
(b) (6)(b) (6) / Payroll	(b) (6)
THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

U.S. Department of Labor
Employment Standards Administration
Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions, Form WH-347 Inst.)

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.



NAME OF CONTRACTOR ☒ ☐ ADDRESS OMB No.: 1215-0149

Mersino Dewatering Inc.

10162 E. Coldwater Rd

PAYROLL NO. 13

FOR WEEK ENDING

PROJECT AND LOCATION

PROJECT OR CONTRACTOR NO.

12/22/2013

Clean Raw Water Intake
Naval Station Great Lakes, Illinois

N40083-12-C-3015

(1) NAME, ADDRESS, AND SOCIAL SECURITY NUMBER OF EMPLOYEE	(3) WORK CLASSIFI CATION	OT OR ST.	(4) DAY AND DATE							TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS					(9) NET WAGES PAID FOR WEEK		
			M	T	W	T	F	S	S				FICA	WITH- HOLDING TAX	STATE	DUES	OTHER		TOTAL DEDUCTIONS	
			16-Dec	17-Dec	18-Dec	19-Dec	20-Dec	21-Dec	22-Dec											
			HOURS WORKED EACH DAY																	
No Activity										0		\$ -	\$ -						\$ -	\$ -
										0		\$ -								
										0		\$ -	\$ -						\$ -	\$ -
										0		\$ -								
												\$ -								

We estimate that it will take an average of 56 minutes to complete this collection of information, including time for reviewing instructions searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection of information, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, ESA, U. S. Department of Labor, Room S3502, 200 Constitution Avenue, N. W., Washington, D. C. 20210. FORM WH-347, Revised Nov. 1998 - FORMERLY SOL 184 - PURCHASE THIS FORM DIRECTLY FROM THE SUPT. OF DOCUMENTS

Date 12/24/2013

I, (b) (6)(b) (6) Payroll Specialist
(Name of Signatory Party) (Title)

do hereby state:

P/ (1) That I pay or supervise the payment of the persons employed by

Mersino Dewatering, Inc on the
(Contractor or Subcontractor)

Clean Raw Water Intake-Naval Station Great Lakes, Illino; that during the payroll period commencing on the
(Building or Work)

16 day of December, 2013, and ending the 22 day of December 2013.
all persons employed on said project have been paid the full weekly wages earned, that no rebates have

Mersino Dewatering Inc. from the full

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination Incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- ☐ — in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

- ☒ — Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

No Activity

NAME AND TITLE	(b) (6)(b) (6)
(b) (6)(b) (6) Payroll	(b) (6)(b) (6)
THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

U.S. Department of Labor
Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.



NAME OF CONTRACTOR ☒ OR SUBCONTRACTOR ☐ ADDRESS 7550 East Melton Road
Industrial & Environmental Services, LLC Gary, Indiana 46403-3147
OMB No.: 1235-0008
Expires: 01/31/2015

PAYROLL NO. 001 FOR WEEK ENDING 09/22/2013 PROJECT AND LOCATION Clean Raw Water Intake
Naval Station Great Lakes, Illinois PROJECT OR CONTRACT NO. N40083-12-C-3015

(1) NAME AND INDIV DUAL DENT FY NG NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	(2) NO. OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	OT OR ST	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS						(9) NET WAGES PAID FOR WEEK		
				M	T	W	Th	F	Sa	Su				FICA	WITH- HOLDING TAX	STATE	401K	OTHER	TOTAL DEDUCTIONS			
				16	17	18	19	20	21	22												
(b) (6)	0	Site Superintendent	o											\$2,580.00								
			s	12.00	12.00	11.00	8.00	0.00	0.00	0.00	43.00	60.00	\$2,580.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$2,580.00		
(b) (6)	0	Quality Control Manager	o											\$624.00								
			s	12.00	12.00	0.00	0.00	0.00	0.00	0.00	24.00	26.00	\$2,080.00	\$159.12	\$289.16	\$67.29	\$62.40	\$0.00	\$577.97	\$1,502.03		
(b) (6)	0	Site Safety and Health Officer	o																			
			s									58.00										
			o																			
			s																			
			o																			
			s																			
			o																			
			s																			
			o																			
			s																			

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that it will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

(over)

U.S. Department of Labor
Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)



Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

Rev. Dec. 2008

NAME OF CONTRACTOR ☒ OR SUBCONTRACTOR ☐ ADDRESS 7550 East Melton Road
Industrial & Environmental Services, LLC Gary, Indiana 46403-3147
OMB No.: 1235-0008
Expires: 01/31/2015

PAYROLL NO. 002 FOR WEEK ENDING 09/29/2013 PROJECT AND LOCATION Clean Raw Water Intake
Naval Station Great Lakes, Illinois PROJECT OR CONTRACT NO. N40083-12-C-3015

(1) NAME AND INDIV DUAL DENT FY NG NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	(2) NO. OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	OT OR ST	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS						(9) NET WAGES PAID FOR WEEK
				M	T	W	Th	F	Sa	Su				FICA	WITH- HOLDING TAX	STATE	401K	OTHER	TOTAL DEDUCTIONS	
				23	24	25	26	27	28	29										
<div><div></div><div>(b) (6)</div><div></div></div>	0	Site Superintendent	O	0.00	0.00	0.00	0.00	0.00	0.00	0.00			\$1,440.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$1,440.00
			S	0.00	0.00	8.00	8.00	8.00	0.00	0.00	24.00	60.00	\$1,440.00							
<div><div></div><div>(b) (6)</div><div></div></div>	0	Site Safety and Health Officer	O	0.00	0.00	0.00	0.00	0.00	0.00	0.00			\$1,392.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$1,392.00
			S	0.00	0.00	8.00	8.00	8.00	0.00	0.00	24.00	58.00								
			O																	
			S																	
			O																	
			S																	
			O																	
			S																	
			O																	
			S																	
			O																	
			S																	
			O																	
			S																	

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that it will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

(over)

Date October 4, 2013

I, (b) (6)(b) (6) Program Manager
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Industrial & Environmental Services, LLC

(Contractor or Subcontractor) on the

Clean Raw Water Intake

; that during the payroll period commencing on the

(Building or Work)

16th day of September, 2013, and ending the 22nd day of September, 2013,

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said

Industrial & Environmental Services, LLC

from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- ☐ — in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

- ☐ — Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

NAME AND TITLE

(b) (6)(b) (6)
Program Manager

SIGNATURE

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

PAYROLL

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)



Rev. Dec. 2008

NAME OF CONTRACTOR ☒ OR SUBCONTRACTOR ☐ ADDRESS 7550 East Melton Road
Industrial & Environmental Services, LLC Gary, Indiana 46403-3147
OMB No.: 1235-0008
Expires: 01/31/2015

PAYROLL NO. 003		FOR WEEK ENDING 10/06/2013		PROJECT AND LOCATION Clean Raw Water Intake Naval Station Great Lakes, Illinois		PROJECT OR CONTRACT NO. N40083-12-C-3015														
(1) NAME AND INDIV DUAL DENT FY NG NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	(2) NO. OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	OT OR ST:	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS						(9) NET WAGES PAID FOR WEEK
				M	T	W	Th	F	Sa	Su				FICA	WITH- HOLDING TAX	STATE	401K	OTHER	TOTAL DEDUCTIONS	
				30	1	2	3	4	5	6										
<div>(b) (6)</div>	0	Site Superintendent	O	0.00	0.00	0.00	0.00	0.00	0.00			\$2,400.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$2,400.00	
			S	8.00	8.00	8.00	8.00	8.00	0.00	0.00	40.00	60.00								\$2,400.00
<div>(b) (6)</div>	0	Quality Control Manager	O	0.00	0.00	0.00	0.00	0.00	0.00			\$832.00	\$159.12	\$289.16	\$67.29	\$62.40	\$0.00	\$577.97	\$1,502.03	
			S	8.00	0.00	8.00	8.00	8.00	0.00	0.00	32.00	26.00								\$2,080.00
			O																	
			S																	
			O																	
			S																	
			O																	
			S																	
			O																	
			S																	
			O																	
			S																	
			O																	
			S																	

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that it will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

U.S. Department of Labor
Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.



NAME OF CONTRACTOR ☒ OR SUBCONTRACTOR ☐ ADDRESS 7550 East Melton Road
Industrial & Environmental Services, LLC Gary, Indiana 46403-3147
OMB No.: 1235-0008
Expires: 01/31/2015

PAYROLL NO. 004 FOR WEEK ENDING 10/13/2013 PROJECT AND LOCATION Clean Raw Water Intake
Naval Station Great Lakes, Illinois PROJECT OR CONTRACT NO. N40083-12-C-3015

(1) NAME AND INDIV DUAL DENT FY NG NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	(2) NO. OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	OT OR ST	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS						(9) NET WAGES PAID FOR WEEK
				M	T	W	Th	F	Sa	Su				FICA	WITH- HOLDING TAX	STATE	401K	OTHER	TOTAL DEDUCTIONS	
				7	8	9	10	11	12	13										
				HOURS WORKED EACH DAY																
(b) (6)	0	Site Superintendent	O	0.00	0.00	0.00	0.00	0.00	0.00	0.00			\$2,400.00							
			S	8.00	8.00	8.00	8.00	8.00	0.00	0.00	40.00	60.00	\$2,400.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$2,400.00
(b) (6)	0	Quality Control Manager	O	0.00	0.00	0.00	0.00	0.00	0.00	0.00			\$1,040.00							
			S	8.00	8.00	8.00	8.00	8.00	0.00	0.00	40.00	26.00	\$2,080.00	\$159.12	\$289.16	\$67.29	\$62.40	\$0.00	\$577.97	\$1,502.03
			O																	
			S																	
			O																	
			S																	
			O																	
			S																	
			O																	
			S																	
			O																	
			S																	
			O																	
			S																	

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that it will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

(over)

Date October 13, 2013

I, (b) (6)(b) (6) Program Manager
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by
Industrial & Environmental Services, LLC on the
(Contractor or Subcontractor)
Clean Raw Water Intake; that during the payroll period commencing on the
(Building or Work)
7th day of October, 2013, and ending the 13th day of October, 2013,
all persons employed on said project have been paid the full weekly wages earned, that no rebates have
been or will be made either directly or indirectly to or on behalf of said
Industrial & Environmental Services, LLC from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly
from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part
3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948,
63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(2) That any payrolls otherwise under this contract required to be submitted for the above period are
correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the
applicable wage rates contained in any wage determination incorporated into the contract; that the classifications
set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship
program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and
Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered
with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ — in addition to the basic hourly wage rates paid to each laborer or mechanic listed in
the above referenced payroll, payments of fringe benefits as listed in the contract
have been or will be made to appropriate programs for the benefit of such employees,
except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☐ — Each laborer or mechanic listed in the above referenced payroll has been paid,
as indicated on the payroll, an amount not less than the sum of the applicable
basic hourly wage rate plus the amount of the required fringe benefits as listed
in the contract, except as noted in section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

NAME AND TITLE (b) (6)(b) (6) Program Manager	SIGNATURE
---	-----------

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR
SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE
31 OF THE UNITED STATES CODE.

PAYROLL

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)



Rev. Dec. 2008

NAME OF CONTRACTOR ☒ OR SUBCONTRACTOR ☐ ADDRESS 7550 East Melton Road
Industrial & Environmental Services, LLC Gary, Indiana 46403-3147
OMB No.: 1235-0008
Expires: 01/31/2015

PAYROLL NO. 004		FOR WEEK ENDING 10/20/2013		PROJECT AND LOCATION Clean Raw Water Intake Naval Station Great Lakes, Illinois		PROJECT OR CONTRACT NO. N40083-12-C-3015												
(1) NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	(2) NO. OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	(4) DAY AND DATE	(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS	(9) NET WAGES PAID FOR WEEK										
			OT OR ST M T W Th F Sa Su 14 15 16 17 18 19 20 HOURS WORKED EACH DAY				FICA WITH-HOLDING TAX STATE 401K OTHER TOTAL DEDUCTIONS											
(b) (6)	0	Site Superintendent	O	0.00	0.00	0.00	0.00	0.00	0.00	0.00								
			S	8.00	8.00	8.00	8.00	8.00	0.00	0.00	40.00	60.00	\$2,400.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
			O															
			S															
			O															
			S															
			O															
			S															
			O															
			S															
			O															
			S															
			O															
			S															

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

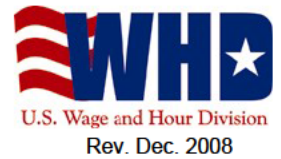
We estimate that it will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

U.S. Department of Labor
Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.



NAME OF CONTRACTOR ☒ OR SUBCONTRACTOR ☐ ADDRESS 7550 East Melton Road
Industrial & Environmental Services, LLC Gary, Indiana 46403-3147
OMB No.: 1235-0008
Expires: 01/31/2015

PAYROLL NO. 006 FOR WEEK ENDING 10/27/2013 PROJECT AND LOCATION Clean Raw Water Intake
Naval Station Great Lakes, Illinois PROJECT OR CONTRACT NO. N40083-12-C-3015

(1) NAME AND INDIV DUAL DENT FY NG NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	(2) NO. OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	OT OR ST	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS						(9) NET WAGES PAID FOR WEEK	
				M	T	W	Th	F	Sa	Su				FICA	WITH- HOLDING TAX	STATE	401K	OTHER	TOTAL DEDUCTIONS		
				21	22	23	24	25	26	27											
(b) (6)	0	Site Superintendent	O	0.00	0.00	0.00	0.00	0.00	0.00	0.00			\$2,400.00								
			S	8.00	8.00	8.00	8.00	8.00	0.00	0.00	40.00	60.00	\$2,400.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$2,400.00	
(b) (6)	0	Quality Control Manager	O	0.00	0.00	0.00	0.00	0.00	0.00	0.00			\$1,040.00								
			S	8.00	8.00	8.00	8.00	8.00	0.00	0.00	40.00	26.00	\$2,080.00	\$159.12	\$289.16	\$67.29	\$62.40	\$0.00	\$577.97	\$1,502.03	
			O																		
			S																		
			O																		
			S																		
			O																		
			S																		
			O																		
			S																		
			O																		
			S																		

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that it will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

(over)

Date October 13, 2013

I, (b) (6)(b) (6) Program Manager
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by
Industrial & Environmental Services, LLC on the
(Contractor or Subcontractor)
Clean Raw Water Intake; that during the payroll period commencing on the
(Building or Work)
7th day of October, 2013, and ending the 13th day of October, 2013,
all persons employed on said project have been paid the full weekly wages earned, that no rebates have
been or will be made either directly or indirectly to or on behalf of said
Industrial & Environmental Services, LLC from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly
from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part
3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948,
63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(2) That any payrolls otherwise under this contract required to be submitted for the above period are
correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the
applicable wage rates contained in any wage determination incorporated into the contract; that the classifications
set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship
program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and
Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered
with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☐ — in addition to the basic hourly wage rates paid to each laborer or mechanic listed in
the above referenced payroll, payments of fringe benefits as listed in the contract
have been or will be made to appropriate programs for the benefit of such employees,
except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☐ — Each laborer or mechanic listed in the above referenced payroll has been paid,
as indicated on the payroll, an amount not less than the sum of the applicable
basic hourly wage rate plus the amount of the required fringe benefits as listed
in the contract, except as noted in section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

NAME AND TITLE (b) (6)(b) (6) Program Manager	SIGNATURE
THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

U.S. Department of Labor
Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)



Rev. Dec. 2008

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

NAME OF CONTRACTOR ☐ OR SUBCONTRACTOR ☒ ADDRESS 362 Blackbrook Road
Lake Erie Diving, Inc. Painesville, Ohio 44077 OMB No.: 1235-0008
Expires: 01/31/2015

PAYROLL NO. 1 FOR WEEK ENDING 11/24/2013 PROJECT AND LOCATION Clean Raw Water Intake
Naval Station Great Lakes, Illinois PROJECT OR CONTRACT NO. N40083-12-C-3015

(1) NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	(2) NO. OF WITH-HOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	OT OR ST.	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY		(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS						(9) NET WAGES PAID FOR WEEK
				M	T	W	Th	F	Sa	Su					FICA	WITH- HOLDING TAX	STATE	COUNTY	OTHER	TOTAL DEDUCTIONS	
				18	19	20	21	22	23	24											
				HOURS WORKED EACH DAY																	
(b) (6)	2	ROV Operator	O	0.00	5.50	0.00	0.00	0.00	0.00	0.00	5.50	\$67.65		\$1,093.68	\$102.03	\$83.67	\$30.99	\$0.00	\$0.00	\$216.69	\$876.99
			S	0.00	8.00	0.00	8.00	0.00	0.00	0.00	16.00	45.10	0.00								
(b) (6)	4	Laborer	O		5.50						5.50	\$54.30		\$877.85	\$47.74	\$67.16	\$24.70			\$139.60	\$738.25
			S		8.00		8.00				16.00	35.20	0.00								
			O																		
			S																		
			O																		
			S																		
			O																		
			S																		
			O																		
			S																		
			O																		
			S																		
			O																		
			S																		
			O																		
			S																		

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Date December 13, 2013

I, (b) (6)(b) (6) President
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Lake Erie Diving, Inc. on the
(Contractor or Subcontractor)
Clean Raw Water Intake Project; that during the payroll period commencing on the
(Building or Work)
18th day of November, 2013, and ending the 24th day of November, 2013,

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said

Lake Erie Diving, Inc. from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS



— in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH



— Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

Fringe Benefits Paid:

Patrick Murphy: 21.5 Hours @ \$27.10/Hour = \$582.65
Edward O'Leary 21.5 Hours @ \$21.45/Hour = \$461.17

NAME AND TITLE

(b) (6)(b) (6)
President

(b) (6)(b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

U.S. Department of Labor
Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)



U.S. Wage and Hour Division
Rev. Dec. 2008

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

NAME OF CONTRACTOR ☐ OR SUBCONTRACTOR ☒ ADDRESS 740 Twin Rail Dr
Minooka IL 60447 OMB No.: 1235-0008
Expires: 01/31/2015

PAYROLL NO. 005 FOR WEEK ENDING 10/20/2013 PROJECT AND LOCATION
Clean Raw Water Intake
Naval Station Great Lakes, Illinois PROJECT OR CONTRACT NO.
N40083-12-C-3015

(1) NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	(2) NO. OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	OT. ORST.	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS						(9) NET WAGES PAID FOR WEEK
				M	T	W	T	F	S	S				FICA	WITH- HOLDING TAX	State	County	OTHER	TOTAL DEDUCTIONS	
				14	15	16	17	17	19	20										
				HOURS WORKED EACH DAY																
(b) (6)	3	Operating Engineers FLT Class 1	O				2.00				2.00	\$76.95	\$1,898.10	\$196.28	\$388.68	\$85.27	\$12.83	\$64.25	\$747.31	\$2,234.79
			S	8.00	2.00	8.00	8.00	8.00			34.00	\$1.30	\$2,982.10							
(b) (6)	8	Operating Engineers FLT Class 1	O				2.00				2.00	\$76.95	\$1,898.10	\$160.76	\$184.12	\$71.45	\$65.78	\$49.30	\$531.41	\$2,001.69
			S	8.00	2.00	8.00	8.00	8.00			34.00	\$1.30	\$2,533.10							
(b) (6)	1	Operating Engineers FLT Class 1	O			4.00	2.00				6.00	\$74.70	\$2,141.40	\$169.63	\$459.05	\$74.74	\$69.40	\$53.54	\$826.36	\$1,815.04
			S	8.00	2.00	8.00	8.00	8.00			34.00	49.80	\$2,641.40							
(b) (6)	2	Operating Engineers FLT Class 1	O				2.00				2.00	\$76.95	\$1,898.10	\$150.21	\$366.96	\$98.18		\$49.18	\$664.53	\$1,730.57
			S	8.00	2.00	8.00	8.00	8.00			34.00	\$1.30	\$2,395.10							
(b) (6)	1	Operating Engineers FLT Class 1	O				2.00				2.00	\$76.95	\$1,898.10	\$150.21	\$387.96	\$66.11	\$61.46	\$49.18	\$714.92	\$1,680.18
			S	8.00	2.00	8.00	8.00	8.00			34.00	\$1.30	\$2,395.10							
(b) (6)	1	Operating Engineers FLT Class 1	O				2.00				2.00	\$76.95	\$666.90	\$141.54	\$356.23	\$90.54		\$47.31	\$635.62	\$1,447.78
			S			8.00	2.00				10.00	\$1.30	\$2,083.40							
(b) (6)	0	Operating Engineers FLT Class 1	O				2.00				2.00	\$74.70	\$647.40	\$145.36	\$391.21	\$95.01		\$48.37	\$679.95	\$1,646.15
			S			8.00	2.00				10.00	49.80	\$2,326.10							
			O																	
			S																	

While completion of Form WH-347 is optional, it is necessary for payment of wages to be made by direct deposit.

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that it will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room 33502, 200 Constitution Avenue, N.W., Washington, D.C. 20210

Date 10/25/2013

I, (b) (6) Office Manager
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Lindahl Marine Contractors, Inc on the

(Contractor or Subcontractor)

Naval Station Great Lakes, Illinois; that during the payroll period commencing on the

(Building or Work)

14 day of October, 2013, and ending the 20 day of October, 2013

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said

Lindahl Marine Contractors, Inc from the full

(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS



— in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH



— Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

NAME AND TITLE

(b) (6)(b) (6)

Office Manager

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS BY A CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

U.S. Department of Labor
Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.



U.S. Wage and Hour Division

Rev. Dec. 2008

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>	ADDRESS	OMB No.: 1235-0008 Expires: 01/31/2015
Lindahl Marine Contractors, Inc.	740 Twin Rail Dr Minooka IL 60447	

PAYROLL NO. 001	FOR WEEK ENDING 09/22/2013	PROJECT AND LOCATION Clean Raw Water Intake Naval Station Great Lakes, Illinois	PROJECT OR CONTRACT NO. N40083-12-C-3015
--------------------	-------------------------------	---	---

(1) NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	(2) NO. OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	OT OR ST	(4) DAY AND DATE								(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS						(9) NET WAGES PAID FOR WEEK
				M	T	W	T	F	S	S	FICA				WITH- HOLDING TAX	State	County	OTHER	TOTAL DEDUCTIONS		
				16	17	18	19	20	21	22											
				HOURS WORKED EACH DAY																	
(b) (6)	3	Operating Enginners FLT Class 1	O									\$76.95	\$410.40	\$101.35	\$123.86	\$43.08	\$6.62	\$26.46	\$301.37	\$985.03	
			S				8.00			8.00	\$1.30	\$1,286.40									
(b) (6)	8	Operating Enginners FLT Class 1	O									\$76.95	\$410.40	\$104.94	\$74.66	\$46.64	\$42.94	\$26.16	\$295.34	\$1,288.06	
			S				8.00			8.00	\$1.30	\$1,583.40									
(b) (6)	1	Operating Enginners FLT Class 1	O									\$74.70	\$398.40	\$94.88	\$202.43	\$41.51	\$38.82	\$24.02	\$401.66	\$800.14	
			S				8.00			8.00	49.80	\$1,201.80									
(b) (6)			O																		
			S																		
	1	Operating Enginners FLT Class 1	O									\$74.70	\$398.40	\$31.63	\$10.40	\$20.68		\$10.36	\$73.07	\$325.33	
			S				8.00			8.00	49.80	\$398.40									
			O																		
			S																		
			O																		
			S																		
			O																		
			S																		

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that it will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W., Washington, D.C. 20210.

Date 09/30/2013

I, (b) (6) Office Manager
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Lindahl Marine Contractors, Inc on the

(Contractor or Subcontractor)

Naval Station Great Lakes, Illinois; that during the payroll period commencing on the

(Building or Work)

16 day of September, 2013, and ending the 22 day of September, 2013.

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said

Lindahl Marine Contractors, Inc from the full

(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS



— in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH



— Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

NAME AND TITLE

(b) (6)

Office Manager

SIGNATURE

(b) (6)(b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

U.S. Department of Labor
Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)



U.S. Wage and Hour Division

Rev. Dec. 2008

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>	ADDRESS	OMB No.: 1235-0008 Expires: 01/31/2015
Lindahl Marine Contractors, Inc.	740 Twin Rail Dr Minooka IL 60447	

PAYROLL NO. 002	FOR WEEK ENDING 09/29/2013	PROJECT AND LOCATION Clean Raw Water Intake Naval Station Great Lakes, Illinois	PROJECT OR CONTRACT NO. N40083-12-C-3015
--------------------	-------------------------------	---	---

(1) NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	(2) NO. OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	OT OR ST.	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS						(9) NET WAGES PAID FOR WEEK	
				M	T	W	T	F	S	S				FICA	WITH- HOLDING TAX	State	County	OTHER	TOTAL DEDUCTIONS		
				23	24	25	26	27	28	29											
				HOURS WORKED EACH DAY																	
(b) (6)	3	Operating Engineers FLT Class 1	O			0.50	1.50	2.00			4.00	\$76.95	\$1,846.80								
			S	6.00		8.00	8.00	8.00			30.00	\$1.30	\$2,438.80	\$169.18	\$300.11	\$73.23	\$11.06	\$55.57	\$609.15	\$1,829.65	
(b) (6)	8	Operating Engineers FLT Class 1	O			0.50	1.50	2.00			4.00	\$76.95	\$1,539.00								
			S			8.00	8.00	8.00			24.00	\$1.30	\$3,107.00	\$166.48	\$197.56	\$73.99	\$68.12	\$54.88	\$561.03	\$2,545.97	
(b) (6)	1	Operating Engineers FLT Class 1	O			0.50	1.50	2.00			4.00	\$76.95	\$1,539.00								
			S			8.00	8.00	8.00			24.00	\$1.30	\$2,119.21	\$140.31	\$351.78	\$61.71	\$57.41	\$46.13	\$657.34	\$1,461.87	
(b) (6)	2	Operating Engineers FLT Class 1	O			0.50	1.50	2.00			4.00	\$74.70	\$1,494.00								
			S			8.00	8.00	8.00			24.00	49.80	\$3,164.03	\$211.72	\$592.10	\$138.38		\$69.33	\$1,011.53	\$2,152.50	
(b) (6)	1	Operating Engineers FLT Class 1	O			0.50	1.50	2.00			4.00	\$76.95	\$1,539.00								
			S			8.00	8.00	8.00			24.00	\$1.30	\$2,777.88	\$195.47	\$404.78	\$127.75		\$64.55	\$792.55	\$1,985.33	
			O																		
			S																		
			O																		
			S																		
			O																		
			S																		

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that it will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W., Washington, D.C. 20210

Date 10/01/2013

I, (b) (6) Office Manager
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Lindah Marine Contractors, Inc on the

(Contractor or Subcontractor)

Naval Station Great Lakes, Illinois; that during the payroll period commencing on the

(Building or Work)

23 day of September, 2013, and ending the 29 day of September, 2013,

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said

Lindah Marine Contractors, Inc from the full

(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS



— in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH



— Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

NAME AND TITLE

(b) (6)(b) (6)

Office Manager

SIGNATURE

(b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATE SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION, SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

U.S. Department of Labor
Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)



U.S. Wage and Hour Division

Rev. Dec. 2008

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

NAME OF CONTRACTOR ☐ OR SUBCONTRACTOR ☒ ADDRESS 740 Twin Rail Dr
Minooka IL 60447
Lindah Marine Contractors, Inc. OMB No.: 1235-0008
Expires: 01/31/2015

PAYROLL NO. 003 FOR WEEK ENDING 10/06/2013 PROJECT AND LOCATION Clean Raw Water Intake
Naval Station Great Lakes, Illinois PROJECT OR CONTRACT NO. N40083-12-C-3015

(1) NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	(2) NO. OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	OT OR ST	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS						(9) NET WAGES PAID FOR WEEK				
				M	T	W	T	F	S	S				FICA	WITH- HOLDING TAX	State	County	OTHER	TOTAL DEDUCTIONS					
				30	01	02	03	04	05	06														
				HOURS WORKED EACH DAY																				
(b) (6)	3	Operating Engineers FLT Class 1	O			2.00		2.50			4.50	\$76.95	\$1,577.48	\$124.81	\$169.89	\$53.51	\$8.16	\$40.87	\$397.24	\$1,680.24				
			S	2.00	2.00	8.00	4.00	8.00			24.00	\$1.30	\$2,077.48											
(b) (6)	8	Operating Engineers FLT Class 1	O			2.00		2.50			4.50	\$76.95	\$1,577.48	\$141.42	\$146.19	\$62.85	\$57.86	\$46.40	\$454.72	\$1,835.76				
			S	2.00	2.00	8.00	4.00	8.00			24.00	\$1.30	\$2,290.48											
(b) (6)	1	Operating Engineers FLT Class 1	O			2.00		2.50			4.50	\$76.95	\$1,577.48	\$123.91	\$297.29	\$54.41	\$50.69	\$40.57	\$566.87	\$1,098.61				
			S	2.00	2.00	8.00	4.00	8.00			24.00	\$1.30	\$1,665.48											
(b) (6)	2	Operating Engineers FLT Class 1	O			2.00		2.50			4.50	\$76.95	\$1,541.48	\$123.91	\$278.54	\$80.98		\$40.57	\$524.00	\$1,541.48				
			S	2.00	2.00	8.00	4.00	8.00			24.00	49.80	\$2,065.48											
(b) (6)	1	Operating Engineers FLT Class 1	O			2.00		2.50			4.50	\$76.95	\$1,372.28	\$108.08	\$148.32	\$70.64		\$35.39	\$362.43	\$1,403.85				
			S	2.00	2.00	8.00		8.00			20.00	\$1.30	\$1,766.28											
(b) (6)	1	Operating Engineers FLT Class 1	O					2.50			2.50	\$74.70	\$585.15	\$164.34	\$439.70	\$105.44		\$54.56	\$764.04	\$1,417.11				
			S					8.00			8.00	49.80	\$2,181.15											
(b) (6)	0	Operating Engineers FLT Class 1	O					2.50			2.50	\$74.70	\$585.15	\$142.25	\$379.87	\$92.98		\$46.83	\$661.93	\$1,229.22				
			S					8.00			8.00	49.80	\$1,891.15											
			O																					
			S																					

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that it will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W., Washington, D.C. 20210

Date 10/10/2013

I, (b) (6) Office Manager
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Lindahi Marine Contractors, Inc on the

(Contractor or Subcontractor)

Naval Station Great Lakes, Illinois;

(Building or Work)

30 day of September, 2013, and ending the 06 day of October, 2013

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said

Lindahi Marine Contractors, Inc

from the full

(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS



— in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH



— Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

NAME AND TITLE

(b) (6)(b) (6)

Office Manager

SIGNATURE

(b) (6)(b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

U.S. Department of Labor
Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.



U.S. Wage and Hour Division

Rev. Dec. 2008

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>	ADDRESS	OMB No.: 1235-0008 Expires: 01/31/2015
Lindahl Marine Contractors, Inc	740 Twin Rail Dr Minooka IL 60447	

PAYROLL NO. 004	FOR WEEK ENDING 10/13/2013	PROJECT AND LOCATION Clean Raw Water Intake Naval Station Great Lakes, Illinois	PROJECT OR CONTRACT NO. N40083-12-C-3015
--------------------	-------------------------------	---	---

(1) NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	(2) NO. OF WITH-HOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	OT OR SL	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS					(9) NET WAGES PAID FOR WEEK	
				M	T	W	T	F	S	S				FICA	WITH- HOLDING TAX	State	County	OTHER		TOTAL DEDUCTIONS
				07	08	09	10	11	12	13										
				HOURS WORKED EACH DAY																
(b) (6)	3	Operating Enginners FLT Class 1	O	4.50		3.00	3.00	3.00			13.50	\$76.95	\$2,783.03	\$219.81	\$465.58	\$95.73	\$14.37	\$71.96	\$867.45	\$2,415.58
			S	8.00	2.00	8.00	8.00	8.00			34.00	\$1.30	\$3,283.03							
(b) (6)	8	Operating Enginners FLT Class 1	O	4.50		3.00	3.00	3.00			13.50	\$76.95	\$2,783.03	\$219.81	\$371.83	\$97.69	\$89.93	\$71.96	\$851.22	\$2,431.81
			S	8.00	2.00	8.00	8.00	8.00			34.00	\$1.30	\$3,283.03							
(b) (6)	1	Operating Enginners FLT Class 1	O			3.00	3.00	3.00			9.00	\$74.70	\$2,006.10	\$155.57	\$407.59	\$68.49	\$63.65	\$49.18	\$744.48	\$1,622.62
			S		2.00	8.00	8.00	8.00			26.00	\$1.30	\$2,367.10							
(b) (6)	2	Operating Enginners FLT Class 1	O	6.00		5.50					11.50	\$76.95	\$1,808.33	\$164.73	\$420.12	\$107.67		\$54.11	\$746.63	\$1,642.70
			S	8.00	2.00	8.00					18.00	\$1.30	\$2,389.33							
(b) (6)	1	Operating Enginners FLT Class 1	O	4.50		3.00	3.00	3.00			13.50	\$76.95	\$2,783.03	\$251.40	\$592.42	\$164.31		\$82.48	\$1,090.61	\$2,597.42
			S	8.00	2.00	8.00	8.00	8.00			34.00	\$1.30	\$3,688.03							
(b) (6)	1	Operating Enginners FLT Class 1	O	4.50		3.00	3.00	3.00			13.50	\$76.95	\$2,783.03	\$219.58	\$641.86	\$141.54		\$71.88	\$1,074.86	\$2,205.17
			S	8.00	2.00	8.00	8.00	8.00			34.00	\$1.30	\$3,280.03							
(b) (6)	0	Operating Enginners FLT Class 1	O			4.00					4.00	\$74.70	\$796.80	\$114.03	\$283.78	\$74.53		\$37.90	\$510.24	\$1,129.76
			S		2.00	8.00					10.00	49.80	\$1,640.00							
			O																	
			S																	

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(2)(i) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that it will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W., Washington, D.C. 20210

Date 10/16/2013

I, (b) (6)(b) (6) Office Manager
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Lindahi Marine Contractors, Inc

(Contractor or Subcontractor)

Naval Station Great Lakes, Illinois

(Building or Work)

07 day of October, 2013, and ending the 13 day of October, 2013

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said

Lindahi Marine Contractors, Inc

from the full

(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below.

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS



— in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH



— Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

NAME AND TITLE

(b) (6)
Office Manager

SIGNATURE

(b) (6)(b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

U.S. Department of Labor
Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)



Rev. Dec. 2008

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

NAME OF CONTRACTOR ☐ OR SUBCONTRACTOR ☒ Edward E. Gillen Marine, LLC ADDRESS 10134 N. Port Washington Road, Mequon, WI 53092 OMB No.: 1235-0008 Expires: 01/31/2015

PAYROLL NO. 2 FOR WEEK ENDING 10/20/2013 PROJECT AND LOCATION Clean Raw Water Intake Naval Station Great Lakes, Illinois PROJECT OR CONTRACT NO. N40083-12-C-3015

(1) NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	(2) NO. OF WITH-HOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	OT, OR ST.	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS						(9) NET WAGES PAID FOR WEEK
				M	T	W	Th	F	Sa	Su				FICA	WITH- HOLDING TAX	State Withholding	OTHER	TOTAL DEDUCTIONS		
				14	15	16	17	18	19	20										
				HOURS WORKED EACH DAY																
(b) (6)	10	Marine Crane Operator -Foreman	O	1.00	0.00	5.00	0.00	0.00	0.00	6.00	\$78.85	\$1,324.30	\$101.31	\$238.36	\$64.69		\$74.35	\$478.71	\$845.59	
			S	8.00	0.00	8.00	0.00	0.00	0.00	0.00	16.00		53.20							
(b) (6)	1	Marine Equipment Operator - Deck Engineer	O	0.00	0.00	3.00	2.00	2.00	12.00	19.00	\$66.53	\$2,993.72	\$229.02	\$676.40	\$189.74		\$60.83	\$1,155.99	\$1,837.73	
			S	9.00	0.00	10.00	10.00	10.00	0.00	0.00	39.00		44.35							
(b) (6)	2	Marine Equipment Operator - Deck Engineer	O	1.00	0.00	5.00	4.00	4.00	12.00	26.00	\$70.68	\$3,365.68	\$257.47	\$663.82	\$164.85		\$195.57	\$1,281.71	\$2,083.97	
			S	8.00	0.00	8.00	8.00	8.00	0.00	0.00	32.00		47.75							
(b) (6)	2	Marine Excavator Operator	O	0.00	0.00	3.00	2.00	0.00	0.00	5.00	\$76.60	\$1,882.30	\$143.99	\$236.58	\$90.08		\$111.66	\$582.31	\$1,299.99	
			S	9.00	0.00	10.00	10.00	0.00	0.00	0.00	29.00		51.70							
(b) (6)	2	Marine Equipment Operator - Tug Captain	O	0.00	0.00	0.00	2.00	2.00	12.00	16.00	\$74.70	\$2,639.40	\$201.91	\$425.86	\$166.41		\$51.94	\$846.12	\$1,793.28	
			S	9.00	0.00	0.00	10.00	10.00	0.00	0.00	29.00		49.80							
(b) (6)	1	Marine Equipment Operator - Tug Captain	O	0.00	0.00	3.00	0.00	0.00	0.00	3.00	\$74.70	\$722.10	\$55.24	\$130.96	\$40.98		\$14.40	\$241.58	\$480.52	
			S	0.00	0.00	10.00	0.00	0.00	0.00	0.00	10.00		49.80							
			O																	
			S																	
			O																	
			S																	

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that it will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

Date 10/23/2013

I, Andrea Jackson President
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Edward E. Gillen Marine, LLC on the
(Contractor or Subcontractor)

Clean Raw Water Intake; that during the payroll period commencing on the
(Building or Work)

14th day of October, 2013, and ending the 20th day of October, 2013,

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said

Edward E. Gillen Marine, LLC from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- ☒ — in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH


- ☐ — Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

NAME AND TITLE
Andrea Jackson, President

SIGNATURE


THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

PAYROLL

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)



Rev. Dec. 2008

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/> Edward E. Gillen Marine, LLC	ADDRESS 10134 N. Port Washington Road, Mequon, WI 53092	OMB No.: 1235-0008 Expires: 01/31/2015
--	---	---

PAYROLL NO. 3	FOR WEEK ENDING 10/27/2013	PROJECT AND LOCATION Clean Raw Water Intake Naval Station Great Lakes, Illinois	PROJECT OR CONTRACT NO. N40083-12-C-3015
------------------	-------------------------------	---	---

(1) NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	(2) NO. OF WITH-HOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	OT OR ST.	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS						(9) NET WAGES PAID FOR WEEK
				M	T	W	Th	F	Sa	Su				FICA	WITH- HOLDING TAX	State Withholding		OTHER	TOTAL DEDUCTIONS	
				21	22	23	24	25	26	27										
				HOURS WORKED EACH DAY																
(b) (6)	1	Marine Equipment Operator - Deck Engineer	O	2.00	2.00	0.00	0.00	0.00	4.50	0.00	8.50	\$66.53	\$1,962.53	\$150.12	\$387.68	\$122.41		\$40.42	\$700.63	\$1,261.90
			S	10.00	10.00	2.00	9.50	0.00	0.00	0.00	31.50	44.35								
(b) (6)	2	Marine Equipment Operator - Deck Engineer	O	2.00	2.00	2.00	0.00	0.00	0.00	0.00	6.00	\$70.68	\$2,334.08	\$178.56	\$349.53	\$112.67		\$145.75	\$786.51	\$1,547.57
			S	10.00	10.00	0.00	10.00	10.00	0.00	0.00	40.00	47.75								
	2	Marine Equipment Operator - Tug Captain	O	2.00	2.00	0.00	0.00	0.00	4.50	0.00	8.50	\$74.70	\$2,203.65	\$168.57	\$316.92	\$138.08		\$44.03	\$667.60	\$1,536.05
			S	10.00	10.00	2.00	9.50	0.00	0.00	0.00	31.50	49.80								
			O																	
			S																	
			O																	
			S																	
			O																	
			S																	
			O																	
			S																	

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that it will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W., Washington, D.C. 20210

Date 10/30/2013

I, Andrea Jackson President
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Edward E. Gillen Marine, LLC on the
(Contractor or Subcontractor)

Clean Raw Water Intake; that during the payroll period commencing on the
(Building or Work)

21st day of October, 2013, and ending the 27th day of October, 2013,

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said

Edward E. Gillen Marine, LLC from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- ☒ — in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

- ☐ — Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

NAME AND TITLE

Andrea Jackson, President

SIGNATURE

Andrea Jackson

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

U.S. Department of Labor
Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)



Rev. Dec. 2008

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/> Edward E. Gillen Marine, LLC	ADDRESS 10134 N. Port Washington Road, Mequon, WI 53092	OMB No.: 1235-0008 Expires: 01/31/2015
--	---	---

PAYROLL NO. 4	FOR WEEK ENDING 11/03/2013	PROJECT AND LOCATION Clean Raw Water Intake Naval Station Great Lakes, Illinois	PROJECT OR CONTRACT NO. N40083-12-C-3015
------------------	-------------------------------	---	---

(1) NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	(2) NO. OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	DT. OR ST.	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS					(9) NET WAGES PAID FOR WEEK	
				M	T	W	Th	F	Sa	Su				FICA	WITH- HOLDING TAX	State Withholding		OTHER		TOTAL DEDUCTIONS
				28	29	30	31	1	2	3										
				HOURS WORKED EACH DAY																
(b) (6)	1	Marine Equipment Operator - Deck Engineer	O	0.00	0.00	2.00	0.00	2.00	8.00	0.00	12.00	\$66.53	\$2,040.16	\$156.07	\$409.41	\$127.45		\$41.58	\$734.51	\$1,305.65
			S	0.00	0.00	10.00	8.00	10.00	0.00	0.00	28.00	44.35								
(b) (6)	2	Marine Equipment Operator - Deck Engineer	O	0.00	0.00	2.00	0.00	0.00	0.00	0.00	2.00	\$70.68	\$1,072.49	\$82.04	\$97.25	\$49.58		\$67.66	\$296.53	\$775.96
			S	0.00	0.00	10.00	9.50	0.00	0.00	0.00	19.50	47.75								
(b) (6)	2	Marine Equipment Operator - Tug Captain	O	0.00	0.00	2.00	0.00	2.50	8.00	0.00	12.50	\$74.70	\$2,328.15	\$178.11	\$348.05	\$146.17		\$46.04	\$718.37	\$1,609.78
			S	0.00	0.00	10.00	8.00	10.00	0.00	0.00	28.00	49.80								
	10	Marine Equipment Operator - Foreman	O	0.00	0.00	0.00	0.00	4.00	8.00		12.00	\$78.85	\$1,371.80	\$102.88	\$243.76	\$66.92		\$77.24	\$490.80	\$881.00
			S	0.00	0.00	0.00	0.00	8.00	0.00	0.00	8.00	53.20								
			O																	
			S																	
			O																	
			S																	
			O																	
			S																	
			O																	
			S																	
			O																	
			S																	

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that it will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

(over)

Date 11/03/2013

I, Andrea Jackson President
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Edward E. Gillen Marine, LLC on the
(Contractor or Subcontractor)

Clean Raw Water Intake; that during the payroll period commencing on the
(Building or Work)

28th day of October, 2013, and ending the 3rd day of November, 2013,

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said

Edward E. Gillen Marine, LLC from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- ☒ — in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

- ☐ — Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

NAME AND TITLE

Andrea Jackson, President

SIGNATURE

Andrea Jackson

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

PAYROLL

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)



Rev. Dec. 2008

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/> Edward E. Gillen Marine, LLC	ADDRESS 10134 N. Port Washington Road, Mequon, WI 53092	OMB No.: 1235-0008 Expires: 01/31/2015
--	---	---

PAYROLL NO. 5	FOR WEEK ENDING 11/10/2013	PROJECT AND LOCATION Clean Raw Water Intake Naval Station Great Lakes, Illinois	PROJECT OR CONTRACT NO. N40083-12-C-3015
------------------	-------------------------------	---	---

(1) NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	(2) NO. OF WITH-HOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	OT OR ST.	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS					(9) NET WAGES PAID FOR WEEK	
				M	T	W	Th	F	Sa	Su				FICA	WITH- HOLDING TAX	State Withholding		OTHER		TOTAL DEDUCTIONS
				4	5	6	7	8	9	10										
				HOURS WORKED EACH DAY																
(b) (6)	1	Marine Equipment Operator - Deck Engineer	O	0.00	0.00	0.00	0.00	0.00	0.00	0.00		\$66.53	\$354.80							
			S	0.00	0.00	8.00	0.00	0.00	0.00	0.00	8.00	44.35		\$27.14	\$57.92	\$21.64		\$7.44	\$114.14	\$240.66
(b) (6)	2	Marine Equipment Operator - Deck Engineer	O	0.00	0.00	0.00	0.00	0.00	0.00	0.00		\$70.68	\$1,050.50							
			S	6.00	0.00	8.00	8.00	0.00	0.00	0.00	22.00	47.75		\$80.36	\$148.55	\$50.56		\$65.16	\$344.63	\$705.87
	2	Marine Equipment Operator - Tug Captain	O	0.00	0.00	0.00	0.00	0.00	0.00	0.00		\$74.70	\$298.80							
			S	6.00	0.00	0.00	0.00	0.00	0.00	0.00	6.00	49.80		\$22.86	\$41.94	\$18.70		\$6.09	\$89.59	\$209.21
			O																	
			S																	
			O																	
			S																	
			O																	
			S																	
			O																	
			S																	
			O																	
			S																	

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that it will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

(over)

Date 11/13/2013

I, Andrea Jackson President
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Edward E. Gillen Marine, LLC on the
(Contractor or Subcontractor)

Clean Raw Water Intake; that during the payroll period commencing on the
(Building or Work)

4th day of November, 2013, and ending the 10th day of November, 2013,

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said

Edward E. Gillen Marine, LLC from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- ☒ — in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

- ☐ — Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

NAME AND TITLE
Andrea Jackson, President

SIGNATURE

Andrea Jackson

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

U.S. Department of Labor
Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)



Rev. Dec. 2008

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/> Edward E. Gillen Marine, LLC	ADDRESS 10134 N. Port Washington Road, Mequon, WI 53092	OMB No.: 1235-0008 Expires: 01/31/2015
--	--	---

PAYROLL NO. 6	FOR WEEK ENDING 11/17/2013	PROJECT AND LOCATION Clean Raw Water Intake Naval Station Great Lakes, Illinois	PROJECT OR CONTRACT NO. N40083-12-C-3015
------------------	-------------------------------	---	---

(1) NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	(2) NO. OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	OT OR ST.	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS						(9) NET WAGES PAID FOR WEEK	
				M	T	W	Th	F	Sa	Su				FICA	WITH- HOLDING TAX	State Withholding		OTHER	TOTAL DEDUCTIONS		
				11	12	13	14	15	16	17											
				HOURS WORKED EACH DAY																	
(b) (6) (b) (6)	1	Marine Equipment Operator - Deck Engineer	O	0.00	0.00	0.00	0.00	1.00	0.00	0.00	1.00	\$66.53	\$1,286.16	\$98.40	\$249.65	\$80.07		\$26.79	\$454.91	\$831.25	
			S	8.00	0.00	9.50	0.00	10.00	0.00	0.00	27.50	44.35									
	2	Marine Equipment Operator - Deck Engineer	O	0.00	0.00	0.00	0.00	2.50	0.00	0.00	2.50	\$70.68	\$2,062.83	\$157.81	\$340.86	\$100.12		\$42.96	\$641.75	\$1,421.08	
			S	8.00	0.00	9.50	10.00	10.00	0.00	2.00	39.50	47.75									
		2	Marine Equipment Operator - Tug Captain	O	0.00	0.00	0.00	0.00	1.00	0.00	0.00	1.00	\$74.70	\$1,444.20	\$110.48	\$196.55	\$90.24		\$29.38	\$426.65	\$1,017.55
				S	8.00	0.00	9.50	0.00	10.00	0.00	0.00	27.50	49.80								
			O																		
			S																		
			O																		
			S																		
			O																		
			S																		
			O																		
			S																		

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that it will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3602, 200 Constitution Avenue, N.W., Washington, D.C. 20210

(over)

Date 11/27/2013

I, Andrea Jackson President
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Edward E. Gillen Marine, LLC on the
(Contractor or Subcontractor)

Clean Raw Water Intake; that during the payroll period commencing on the
(Building or Work)

11th day of November, 2013, and ending the 17th day of November, 2013,

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said

Edward E. Gillen Marine, LLC from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- ☒ — in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

- ☐ — Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

NAME AND TITLE

Andrea Jackson, President

SIGNATURE

Andrea Jackson

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

U.S. Department of Labor
Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)



Rev. Dec. 2008

NAME OF CONTRACTOR ☐ OR SUBCONTRACTOR ☒ Edward E. Gillen Marine, LLC ADDRESS 10134 N. Port Washington Road, Mequon, WI 53092 OMB No.: 1235-0008 Expires: 01/31/2015

PAYROLL NO. 7 FOR WEEK ENDING 11/24/2013 PROJECT AND LOCATION Clean Raw Water Intake Naval Station Great Lakes, Illinois PROJECT OR CONTRACT NO. N40083-12-C-3015

(1) NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	(2) NO. OF WITH-HOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	OT OR ST.	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS						(9) NET WAGES PAID FOR WEEK	
				M	T	W	Th	F	Sa	Su				FICA	WITH- HOLDING TAX	State Withholding		OTHER	TOTAL DEDUCTIONS		
				18	19	20	21	22	23	24											
				HOURS WORKED EACH DAY																	
(b) (6) (b) (6) (b) (6)	1	Marine Equipment Operator - Deck Engineer	O	0.00	6.50	0.00	0.00	0.00	0.00	0.00	6.50	\$66.53	\$1,363.80	\$104.33	\$264.71	\$84.91		\$28.41	\$482.36	\$881.44	
			S	4.00	10.00	7.00	0.00	0.00	0.00	0.00	21.00	44.35									
	2	Marine Equipment Operator - Deck Engineer	O	0.00	9.00	1.00	0.00	0.00	0.00	0.00	10.00	\$70.68	\$1,996.05	\$152.70	\$329.82	\$96.88		\$118.59	\$697.99	\$1,298.06	
			S	4.00	8.00	7.00	8.00	0.00	0.00	0.00	27.00	47.75									
	2	Marine Equipment Operator - Tug Captain	O	0.00	6.50	0.00	0.00	0.00	0.00	0.00	6.50	\$74.70	\$1,531.35	\$117.15	\$208.41	\$95.70		\$31.15	\$452.41	\$1,078.94	
			S	4.00	10.00	7.00	0.00	0.00	0.00	0.00	21.00	49.80									
	10	Marine Equipment Operator - Foreman	O	0.00	8.50	1.00	0.00	0.00	0.00	0.00	0.00	9.50	\$78.85	\$1,600.28	\$44.75	\$263.12	\$77.88		\$91.09	\$476.84	\$1,123.44
			S	4.00	8.00	4.00	0.00	0.00	0.00	0.00	16.00	53.20									
			O																		
			S																		
			O																		
			S																		
			O																		
			S																		
			O																		
			S																		

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(i) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that it will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W., Washington, D.C. 20210

(over)

Date 11/27/2013

I, Andrea Jackson President
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Edward E. Gillen Marine, LLC on the
(Contractor or Subcontractor)

Clean Raw Water Intake; that during the payroll period commencing on the
(Building or Work)

18th day of November, 2013, and ending the 24th day of November, 2013,

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said

Edward E. Gillen Marine, LLC from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- ☒ — in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

- ☐ — Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

NAME AND TITLE
Andrea Jackson, President

SIGNATURE
Andrea Jackson

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

U.S. Department of Labor
Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)



Rev. Dec. 2008

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/> Edward E. Gillen Marine, LLC	ADDRESS 10134 N. Port Washington Road, Mequon, WI 53092	OMB No.: 1235-0008 Expires: 01/31/2015
--	---	---

PAYROLL NO. 8	FOR WEEK ENDING 12/01/2013	PROJECT AND LOCATION Clean Raw Water Intake Naval Station Great Lakes, Illinois	PROJECT OR CONTRACT NO. N40083-12-C-3015
------------------	-------------------------------	---	---

(1) NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	(2) NO. OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	OT OR ST.	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS					(9) NET WAGES PAID FOR WEEK	
				M	T	W	Th	F	Sa	Su				FICA	WITH- HOLDING TAX	State Withholding	OTHER	TOTAL DEDUCTIONS		
				25	26	27	28	29	30	1										
				HOURS WORKED EACH DAY																
(b) (6) (b) (6)	10	Marine Equipment Operator - Foreman	O	0.00	0.00	0.00	0.00	0.00	0.00	0.00		\$78.85	\$319.20					\$18.62	\$89.32	\$229.88
			S	6.00	0.00	0.00	0.00	0.00	0.00	0.00	6.00	53.20		\$4.63	\$47.59	\$18.48				
	2	Marine Equipment Operator - Deck Engineer	O	0.00	0.00	0.00	0.00	0.00	0.00	0.00		\$70.68	\$286.50					\$17.80	\$97.31	\$189.19
			S	6.00	0.00	0.00	0.00	0.00	0.00	0.00	6.00	47.75		\$21.92	\$43.75	\$13.84				
	2	Marine Equipment Operator - Tug Captain	O	0.00	0.00	0.00	0.00	0.00	0.00	0.00		\$74.70	\$298.80					\$6.12	\$81.80	\$217.00
			S	6.00	0.00	0.00	0.00	0.00	0.00	0.00	6.00	49.80		\$22.85	\$34.30	\$18.53				
			O																	
			S																	
			O																	
			S																	
			O																	
			S																	
			O																	
			S																	

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Date 12/04/2013

I, Andrea Jackson President
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Edward E. Gillen Marine, LLC on the
(Contractor or Subcontractor)

Clean Raw Water Intake; that during the payroll period commencing on the
(Building or Work)
25th day of November, 2013, and ending the 1st day of December, 2013,

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said

Edward E. Gillen Marine, LLC from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967, 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- ☒ — in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

- ☐ — Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

NAME AND TITLE

Andrea Jackson, President

SIGNATURE

Andrea Jackson

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

U.S. Department of Labor
Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.



U.S. Wage and Hour Division
Rev. Dec. 2008

OMB No.: 1235-0008
Expires: 01/31/2015

NAME OF CONTRACTOR ☐ OR SUBCONTRACTOR ☒ ADDRESS
NORTHERN DIVERS USA 10404 FOX BLUFF LN, SPRING GROVE, IL 600

PAYROLL NO. 1 FOR WEEK ENDING Oct 12, 2013 PROJECT AND LOCATION Clean Raw Water Intake
Naval Station Great Lakes, Illinois PROJECT OR CONTRACT NO. N40083-12-C-3015

(1)	(2)	(3)	(4) DAY AND DATE							(5)	(6)	(7)	(8) DEDUCTIONS					(9)
NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	NO. OF WITHHOLDING EXEMPTIONS	WORK CLASSIFICATION	OT OR ST.	SU	M	TU	W	TH	F	SA	TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	FICA	WITH- HOLDING TAX	OTHER	TOTAL DEDUCTIONS	NET WAGES PAID FOR WEEK
			HOURS WORKED EACH DAY															
(b) (6)		DECK EQUIP OPERATOR	O	5.5				1	3		9.5	55.28	525.16 1021.80					1556.96
			S	8	2	2	8	8			28	36.85						
		CRAFT FOREMAN	O					1	3	12	16	77.07	1233.62 1130.36					2363.48
			S	2	2	2	8	8			22	51.38						
			O															
			S															
			O															
			S															
			O															
			S															
			O															
			S															
			O															
			S															

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(i) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DCL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that it will take an average of 35 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3602, 200 Constitution Avenue, N.W., Washington, D.C. 20210

(over)

Date Oct 14, 2013I, KONNI FROSOLONE VICE PRESIDENT
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

NORTHERN DIVERS USA

(Contractor or Subcontractor) on the

Clean Raw Water Intake

(Building or Work)

6 day of Oct 2013 and ending the 12 day of Oct 2013

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said

NORTHERN DIVERS USA

(Contractor or Subcontractor) from the full

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below.

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS



- in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH



- Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

NAME AND TITLE

KONNI FROSOLONE / VICE PRESIDENT

SIGNATURE

Konni Frosolone

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 281 OF TITLE 31 OF THE UNITED STATES CODE.

U.S. Department of Labor
Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See instructions at www.dol.gov/whd/forms/wh347instr.htm)

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.



U.S. Wage and Hour Division

Rev. Dec. 2008

OMB No.: 1235-0008

Expires: 01/31/2015

NAME OF CONTRACTOR ☐ OR SUBCONTRACTOR ☒

OR SUBCONTRACTOR ☒

ADDRESS

10404 FOX BLUFF LN
SPRING GROVE, IL 60081

NORTHERN DIVERS USA

PAYROLL NO.

3

FOR WEEK ENDING

OCT 24, 2013

PROJECT AND LOCATION

Clean Raw Water Intake
Naval Station Great Lakes, IL

PROJECT OR CONTRACT NO.

N40083-12-C-3015

(1) NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	(2) NO. OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS					(9) NET WAGES PAID FOR WEEK
			OT OR ST	SUM	TU	W	TH	F	SA				FICA	WITH- HOLDING TAX	OTHER	TOTAL DEDUCTIONS		
				HOURS WORKED EACH DAY														
(b) (6)		DECK EQUIPMENT OPERATOR	O	4	4					8	55.28	442.24						
			S	8	8	2	8				26	36.85	958.10					1400.34
(b) (6)		CRAFT FOREMAN	O	4	4					8	77.07	616.56						
			S	8	8	2	8	8			34	51.38	1746.92					2363.48
			O															
			S															
			O															
			S															
			O															
			S															
			O															
			S															
			O															
			S															

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that it will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room 33502, 200 Constitution Avenue, N.W., Washington, D.C. 20210

(over)

U.S. Department of Labor
Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.



Rev. Dec. 2008

NAME OF CONTRACTOR <input type="checkbox"/> OR SUBCONTRACTOR <input checked="" type="checkbox"/>	ADDRESS	OMB No.: 1235-0008 Expires: 01/31/2015
Edward E. Gillen Marine, LLC	10134 N. Port Washington Road, Mequon, WI 53092	

PAYROLL NO. 1	FOR WEEK ENDING 10/13/2013	PROJECT AND LOCATION Clean Raw Water Intake Naval Station Great Lakes, Illinois	PROJECT OR CONTRACT NO. N40083-12-C-3015
------------------	-------------------------------	---	---

(1) NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	(2) NO. OF WITH-HOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	OT. OR ST.	(4) DAY AND DATE								(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS						(9) NET WAGES PAID FOR WEEK
				M	T	W	Th	F	Sa	Su	FICA				WITH- HOLDING TAX	State Withholding		OTHER	TOTAL DEDUCTIONS		
				7	8	9	10	11	12	13											
				HOURS WORKED EACH DAY																	
(b) (6)	10	Marine Crane Operator -Foreman	O	4.00	0.00	0.00	0.50	1.50	0.00	0.00	6.00	\$78.85	\$2,281.90	\$168.76	\$320.14	\$106.87		\$129.27	\$725.04	\$1,556.86	
			S	10.00	2.00	2.00	10.00	10.00	0.00	0.00	34.00	53.20									
(b) (6)	1	Marine Equipment Operator - Deck Engineer	O	4.00	0.00	0.00	0.50	1.50	0.00		6.00	\$66.53	\$1,907.08	\$145.88	\$372.15	\$118.81		\$39.59	\$676.43	\$1,230.65	
			S	10.00	2.00	2.00	10.00	10.00	0.00	0.00	34.00	44.35									
(b) (6)	2	Marine Equipment Operator - Deck Engineer	O	4.00	0.00	0.00	0.50	1.50	11.00	0.00	17.00	\$70.68	\$2,825.06	\$216.13	\$472.28	\$137.22		\$167.53	\$993.16	\$1,831.90	
			S	10.00	2.00	2.00	10.00	10.00	0.00	0.00	34.00	47.75									
(b) (6)	2	Marine Excavator Operator	O	4.00	0.00	0.00	0.50	1.50	0.00	0.00	6.00	\$76.60	\$2,217.40	\$169.63	\$320.36	\$106.83		\$131.40	\$728.22	\$1,489.18	
			S	10.00	2.00	2.00	10.00	10.00	0.00	0.00	34.00	51.70									
(b) (6)	2	Marine Equipment Operator - Tug Captain	O	4.00	0.00	0.00	0.50	1.50	0.00	0.00	6.00	\$74.70	\$2,141.40	\$163.82	\$301.36	\$134.04		\$43.10	\$642.32	\$1,499.08	
			S	10.00	2.00	2.00	10.00	10.00	0.00	0.00	34.00	49.80									
			O																		
			S																		
			O																		
			S																		
			O																		
			S																		

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that it will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

Date 10/16/2013

I, Andrea Jackson President
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Edward E. Gillen Marine, LLC on the
(Contractor or Subcontractor)

Clean Raw Water Intake; that during the payroll period commencing on the

(Building or Work)

7th day of October, 2013, and ending the 13th day of October, 2013,

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said

Edward E. Gillen Marine, LLC from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- ☒ — in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

- ☐ — Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

NAME AND TITLE
Andrea Jackson, President

SIGNATURE
Andrea Jackson

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

U.S. Department of Labor
Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.



U.S. Wage and Hour Division

Rev. Dec. 2008

OMB No.: 1235-0008
Expires: 01/31/2015

NAME OF CONTRACTOR ☐

OR SUBCONTRACTOR ☒

ADDRESS

10404 FOX BLUFF LN
SPRING GROVE, IL 60081

NORTHERN DIVERS USA

PAYROLL NO.

5

FOR WEEK ENDING

Nov 9, 2013

PROJECT AND LOCATION

Clean Raw Water Intake
Naval Station Great Lakes, IL

PROJECT OR CONTRACT NO.

N40083-12-C-3015

[illegible]

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(b)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that it will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

(over)

Date

11/13/2013

I, KONNI FROSOLONEVICE PRESIDENT

(Name of Signatory Party)

(Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

NORTHERN DIVERS USA

(Contractor or Subcontractor)

on the

Clean Raw Water Intake

(Building or Work)

; that during the payroll period commencing on the

3

day of

Nov2013

and ending the

9

day of

Nov2013

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said

NORTHERN DIVERS USA

(Contractor or Subcontractor)

from the full

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS



in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH



Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)

EXPLANATION

REMARKS:

NAME AND TITLE

SIGNATURE

KONNI FROSOLONE / VICE PRESIDENT

Konni Frosolone

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.